

**PATENT NUMBER**

KW ③ SCANNED Q.A. <i>[Signature]</i>	O.I.P.E. PATENT DATE
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	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims	Print Claim for O.G.	
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.	_____ (Assistant Examiner) (Date)		<b>NOTICE OF ALLOWANCE MAILED</b>  _____			
<input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S. Patent. No. _____ _____ _____	_____ (Primary Examiner) (Date)		<b>ISSUE FEE</b> <table border="1"> <tr> <td>Amount Due</td> <td>Date Paid</td> </tr> </table>		Amount Due	Date Paid
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<input type="checkbox"/> The terminal ____ months of this patent have been disclaimed.	_____ (Legal Instruments Examiner) (Date)		<b>ISSUE BATCH NUMBER</b>			
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